



**Balboa Island  
museum  
NEWPORT BEACH**

**High School Student  
VOLUNTEER APPLICATION**

Today's Date \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Email \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Cell \_\_\_\_\_

I, parent of \_\_\_\_\_, release permission for my child to volunteer  
at the Balboa Island Museum with adult supervision.

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Comm. Service Advisor \_\_\_\_\_

Please return this application to the museum or send it via e-mail to  
[info@balboaislandmuseum.org](mailto:info@balboaislandmuseum.org)  
Thank you for your support!

210 B Marine Avenue, Balboa Island, CA 92662-0147  
949-675-3952      [www.balboaislandmuseum.org](http://www.balboaislandmuseum.org)